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					complete If Known	na se manto	
FEE TRANSMITTAI					10/063,779		
for EV 2004		Filing			05/12/2002		
for FY 2004		First Named Inventor Kay I		Inventor	Kay Ming Lee	ay Ming Lee	
Effective 10/01/2003. Patent fees are subject to annual revision.		Ехап	niner Na	ıme	MOHAMEDULLA, SALEHA R	•	
Applicant claims small entity status. See 37 CFR 1.27		Art U	nil		1756		
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Alton	пеу Дос	ket No.	NAUP0469USA		
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Deposit Account 50-3105	Fee Code	Fee c (\$)		Fee (\$)	Fee Description	Fee Paid	
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FEE CALCULATION	1251	110	2251	55 Ext	tension for reply within first month		
1. BASIC FILING FEE	1252	420	2252	210 Ext	tension for reply within second month		
Large Entity Small Entity Fee Pee Fee Fee Fee Description Fee Paid	1253		2253	475 Ext	lension for reply within third month		
Fee Peg Fee Fee Fee Description Fee Paid Code (8) Code (8)		1,480	2254		lension for reply within fourth month		
1001 770 2001 385 Utility filing fee		2,010	ł .	•	lension for reply within fifth month		
1002 340 2002 170 Design filing fee	1401		2401		tice of Appeal		
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1004 770 2004 385 Reissue filing fee 1005 160 2005 80 Provisional filing fee	1403	290 1,510	2403 1451		tivest for oral hearing ition to institute a public use proceeding		
	1452		2452	_	ition to revive - unavoidable		
SUBTOTAL (1) (\$) 0.00		1,330	2453		ition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2501		My Issue lee (or reissue)	********	
Extra Claims below Fee Paid	1502	480	2502	240 Des	sign issue fee		
Independent	1503		2503	320 Pla	ınt issue fee		
Claims - J - J - J - J - J - J - J - J - J -	1460		1460		titions to the Commissioner		
Large Entity   Small Entity	1807		1807	_	ocessing fee under 37 CFR 1.17(q)		
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	1806		1806		omission of information Disclosure Stmt		
1202 18 2202 9 Claims in excess of 20	8021		8021	brol	porty (times number of properties)		
1201 88 2201 43 Independent claims in excess of 3	1809	770	2809	385 Filia (37	ng a submission after final rejection CFR 1.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810		each additional invention to be snined (37 CFR 1.129(b))		
1204 66 2204 43 ** Reissue independent claims over original patent	1801	770	2801		iquest for Continued Exemination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900 Re	equest for expedited examination a design application		
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SUBMITTED BY (Complete (if applicable))							
Name (Print/Type) Winston Hsu / — A		Ragistra (Attorney/		41,528	Telephone 888289237350		
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OFFICIAL

FAX TO: MOHAMEDULLA, SALEHA R

Tel: (571)272-1387 Fax: (703) 872-9310 ART UNIT: 1756

FROM: Winston Hsu, PATENT AGENT, REG. NO.: 41,526

**SERIAL NO.: 10/063,779** 

ATTORNEY DOCKET NO.:NAUP0469USA

SUBJECT: RESPONSE TO OFFICE ACTION MAILED ON 03/19/2004

**TOTAL PAGES: 27 PAGES (INCLUDING COVER PAGE)** 

Winston Hsu 2004/06/15

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1	Application Number	10/063,779		
TRANSMITTAL	Filing Date	05/12/2002		
FORM	First Named Inventor	Key Ming Lee		
(to be used for all correspondence after initia	filing) Art Unit	1756		
	Examiner Name	MOHAMEDULLA, SALEHA R		
Total Number of Pages in This Submission	25 Attorney Docket Number	NAUP0489USA		
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	ENCLOSURES (Check all )	that apply)		
Fee Transmittal Form    Drawing(s)				
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